LOBBYIST MONTHLY REPORT FORM



State of Idaho

Ben Ysursa Secretary of State To Be Filed By:

LOBBYISTS (Sec. 67-6619) Page 1 of 2 Page(s) THIS SPACE FOR OFFICE USE ONLY

OT APR 10 PN 4: 22

Phone: (208) 334-2852 Fax: (208) 334-2282

See instructions at bottom of page								STATE OF IVANO						
Lobbyist's name and permanent business address							Date prepared Period covered							
Ale	ex S. LaBe	au										month en	ding	
Idaho Assn of Commerce & Industry							4/10/07				(Mo.)	(Day)	(Yr.)	
P. O. Box 389 Boise, ID 83701					4/10/07				3	31	07			
Item														
1	<u> </u>	· · · · · · · · · · · · · · · · · · ·	ole expenditures made o	,				·					yer.	
Reimb		xpenditure Living and Travel Lobbying Activity	*Total Amount for All Employers	Item 3, at bottom of				buted by each employer (Identify		mployers, under				
D	o Not Have to b	e Reported		I	Employer No.	1	_	Employer No. 2		Employer N	o. 3	Employer	No. 4	
	inment nd Refreshme	ent	\$108.86	\$_	108.	86	\$		\$_			\$		
Living	Accommodat	ions	0.00	_	0.	.00	-							
Advert	sing		0.00	_	0	.00	-		_				- Made rillion and address of the sector	
Travel			0.00	_	0.	.00	_		۱ _					
Telepho	one		0.00	l _	0	.00	١.		_					
Other E	Expenses or S	Services	0.00		0	.00	_		_					
				-			-		-					
		Total	\$108.86	\$	108	86	\$	0.00	\$		0.00	\$	0.00	
							l				İ			
	,		u are reporting for require										on Page 1.	
Item 2	Date Date	r each expendit	ture of more than fifty do	mars		mount		Names of Legis					in Group	
	Continued on	attached page(s)				1				******				
		INST	RUCTIONS			116	Employer(s) Name(s) and Address(es)							
			. 14	daho Assn of C	omn	nerce & I	nduetr							
Who should file this form: Any lobbyist registered under Section 67-6617 Idaho Code						No. 1	No. 1 Idaho Assn of Commerce & Industry P. O. Box 389, Boise, ID 83701							
0/-0	oo i / idano C	ode												
	Filing deadline: Monthly reports due within ten (10) days of the month for activities of the past month.													
TO BE FILED WITH:												*		
Ben Ysursa														
			etary of State Box 83720											
			ID 83720-0080	No										

4	personal prop		erty to any Legisl		ablic or Executive Official or for or on behalf of any Legislator, Public or Executive Official. Name of Legislator, Public or Executive Official Receiving or Benefiting							
	3/1/0	7	\$6.95/ea		gisla	ative Directory to all membe						
	or Ho the L Code table) 09, 17, 21,	Bill, Re Bill, Re Legislat H7, H84, H179, H189, H206, H213, H246, H272, S10 S10 S10	Resolution or other as supporting or op	on, the number of the Senate legislative activity in which posing. Appropriation Bill Number and Section Number	Codd 01 02 03 04 05 06 07 08 09 10 11 12 13 14 15 16	Agriculture, horticulture, farming, and livestock Amusements, games, athletics and sports Banking, finance, credit and investments Children, minors, youth, senior citizens Church and religion Consumer affairs Ecology, environment, pollution, conservation, zoning, land and water use Education Elections, campaigns, voting, political parties Equal rights, civil rights, minority affairs Government, financing, taxation, revenue, budget, appropriations, bids, fees, funds Government, county Government, federal		and controlled substances, health insurance, hospitals Higher education Housing, construction, codes Insurance (excluding health insurance) Labor, salaries and wages, collective bargaining Law enforcement, courts, judges, crimes, prisons License, permits Liquor Manufacturing, distribution and services Natural resources, forest and forest products, fisheries, mining and mining products Public lands, parks, recreation Social insurance, unemployment insurance, public assistance, workmen's compensation Transportation, highways, streets and roads				
tem Identify any rule, ratemaking decision, procurement, contract, bid or bid process, financial services or bond lobbyist was supporting or opposing.			CERTIFICATION: I hereby certify that the above is a true, complete at correct statement in accordance with Section 67-6624 Idaho Code. Lobby ist signature Date									